Approved for use through 1/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/943,799			ing Date 31/2001	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN	
FOR			UMBER FI	.ED NU	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(a), (p),		N/A		N/A		N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 = *				x \$ =		OR	x \$ =		
	EPENDENT CLAIN CFR 1.16(h))	IS	minus 3 = *			1	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE she is \$ add	ets of pap 250 (\$125 tional 50	gs exceed 100 on size fee due for each n thereof. See CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									1			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		]	TOTAL		
APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								L ENTITY	OR		ER THAN ALL ENTITY	
AMENDMENT	12/08/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	· 16	Minus	·· 20	= 0	1	X \$26 =	0	OR	x s =		
	Independent (37 CFR 1,16(h))	· 4	Minus	···6	= 0	1	X \$110 =	0	OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())	*	Minus	**	-		x s =		OR	x \$ =		
Σ	Independent (37 CFR 1.16(h))		Minus	***	=	]	x \$ =		OR	x \$ =		
필	Application Size Fee (37 CFR 1.16(s))					l			ı			
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** If *** The	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20".  "If the "Highest Number Previously Paid For "Number Previously Paid For "Number Previously Paid For "Number Previously Paid For "Num											

process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, processy an application. Combining by governed by 30 csts. 122 and 30 cst 17.1 mis collection be sentiated to laber 2 interest to complete against graining preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information dofficer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.